IN THE SUPERIO COURT OF THE STATE OF ARIZ IN AND FOR THE COUNTY OF YAVAPAI

DIVISION: 6

JEANNE HICKS, CLERK

HON. THOMAS B. LINDBERG

By: Rachel Roehe, Deputy Clerk

CASE NO. CR20081339

DATE: July 10, 2009

TITLE:

COUNSEL:

STATE OF ARIZONA

Yavapai County Attorney

(For Plaintiff)

FILED

3:14 O'Clock P.M. JEANNE HICKS, CLERK

DATE: July 10, 2009

BY: Rachel Roehe

Deputy

VS.

STEVEN CARROLL DEMOCKER

(D-1)

(Plaintiff)

John Sears

107 North Cortez Street, Suite 104

Prescott, AZ 86301

Larry Hammond Anne Chapman

OSBORN MALEDON, P.A.

2929 North Central Avenue, 21st Floor

Phoenix, AZ 85012

(For Defendant)

HEARING ON:

NATURE OF PROCEEDINGS

COURT REPORTER

Ex Parte, in Camera Under Seal Hearing

Roxanne Tarn

START TIME: 2:22 p.m.

APPEARANCES:

Steven DeMocker, Defendant

John Sears, Counsel for Defendant Larry Hammond, Counsel for Defendant

This is the time set for the Ex Parte, in Camera Under Seal Hearing.

If a Motion for Indigency and 15.9 Appointment has been filed, it shall be sealed in the file, but shall be made available to the Appellate Court if there is a conviction in this case. These documents shall not be scanned into the computer.

Steven Democker is sworn and testifies as to indigency.

The Court finds that the Defendant is currently indigent based upon the financial statements and testimony that clarifies the financial statements. The Court directs that the financial statement shall be sealed.

The Defendant's presence is waived for the remainder of the hearing. At 2:36 p.m., the Defendant exits the hearing.

Discussion takes place regarding Public Defender issues.

The Court requests that Defense Counsel provide the Court with a draft of an order for the prospective persons nominated and their cost per hour.

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Discussion takes place regarding the cost of the transcript of the Simpson/12.9 Hearing.

The Court has contacted the Public Defender's Office and set up a tentative meeting as a confidential *ex parte*, closed, under seal type of proceeding with John Sears and the Court, on **Thursday**, **July 16**, **2009**, **at 3:30 p.m**. The Defendant's presence is waived. Larry Hammond's presence is waived if he so chooses.

END TIME: 3:14 p.m.

THEREAFTER, off the record, the Court directs that the Defendant's Financial Statement shall be attached to this minute entry. This minute entry shall be sealed in the file, shall not be scanned into the computer system and shall not be distributed.

1514	ATE OF ADIZONA DISTRACT		CACE/COMPLAINT	101	
-vs-	ATE OF ARIZONA Plaintiff		[CASE/COMPLAINT]	1U.J	DECEMBANTIO
-vs-	•		CR2008-1339	,	DEFENDANT'S FINANCIAL
		- 11		1	STATEMENT
	STEVEN C. DEMOCKER		Dis. 6	1	(Confidential)
Def	fendant (FIRST, MI, LAST)	- L			(Oormdeiliai)
llerere-					
	RUCTIONS TO THE DEFENDANT: YO				
	her to appoint an attorney to represent				
	matter relating to indigence Use care				
	such and write on the back of the page.				g information, you may b
unis	shed for contempt of court or subjected t	o prose	cution for fraud or perjur	y.	
_	ull name: <u>Steven</u> ()	Do A	And Ka		
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] Widowed [] Partnered	warreu	, living w/ spouse [] ivia	med but	separated [] Divorced
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/. BS 1	raddition to yoursell, now many other at	วนแร นับ	you support?	_ HOW III	any children?
NCC	OME:				
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	st below in Column 1 the money that you				
	th your spouse, list below in Column 2 t e separated, divorced, widowed, partner				serves each month. If yo
alt	e separated, divorced, widowed, partner	ed of Sir	igie, leave Column 2 biai Column 1		Column 2
		A 100 c			
a.	Wages, Salaries, Self	Amo	bunk paid to intervioliting	Amoun	t paid to Spouse M onthly
a.		•	S	œ	*
b.	Employment Income	Ð		_	
	Payroll deductions	→ <u> </u>	,	_ \$	<u> </u>
c. d.	Unemployment compensation Welfare benefits	Ð		- ♣	
		₽	,	_	1
e. f.	Disability benefits	Ð		_ \$	
	Veteran's benefits	\$		_ \$	1
g.	Social Security benefits	\$		_ \$!
h.	Worker's compensation	\$		_ \$	<u> </u>
I. :	Accident benefits	\$		_	
). !-	Retirement benefits	\$		_ \$	
k.	Allotment checks	\$		_ \$	
	Interest	\$		\$	
l.	Policial a mala				.
m.		\$		_ \$	
m. n.	Child support received	\$		_	
m. n. o.	Child support received Alimony or maintenance received			_ \$ _ \$ _ \$	
m. n.	Child support received Alimony or maintenance received Total of any other income received	\$		_ \$ _ \$ _ \$ _ \$	
m. n. o.	Child support received Alimony or maintenance received	\$		\$ _ \$ _ \$ _ \$	
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m. n. o. p.	Child support received Alimony or maintenance received Total of any other income received Source: TOTAL MONTHLY INCOME: ETS: Cash: List below the amounts of cash he Cash on you, your spouse, or in your Cash in banks, credit unions, and else	\$ \$ \$ Id or va jail projewhere	perty, and at home	_ \$ _ \$ _ \$ _ \$ _ \$	30°00 *
m. n. o. p. ASSI 5. C a b	Child support received Alimony or maintenance received Total of any other income received Source: TOTAL MONTHLY INCOME: ETS: Cash: List below the amounts of cash he Cash on you, your spouse, or in your	\$ \$ \$ ld or va jail propewhere by other	perty, and at home	_ \$ _ \$ _ \$ _ \$ \$	30,000 *

COURT

_County, Arizona

6.	Personal Property: List below any valuable personal	I property you own and	d have not listed	above which i
	not needed by you or your family for day-to-day living.	. *	_	
	a. Description	_ \$	\$	_ \$
	h Description	(value)	(owed)	(net value
	b. Description	<u> </u>	\$	_ \$
	a. Depositution	(value)	(owed)	(net value
	c. Description	_ \$	\$	_ \$
		(value)	(owed)	(net value
7	Auto: Complete the following information about an	v motor vehicles (e./	n: care trucke	trailara haate
٠.	airplanes, motorcycles) that you are buying, that you of			
	a. Make, Year and Model		S	¢
		(value)	(owed)	_ Ψ (net value
	b. Make, Year and Model		\$	•
		(value)	(owed)	_ Ψ (net value
8.	Real Estate: Complete the following information a			
	buildings) that you are buying, that you own, or in which	ch you claim to have a	n interest	otifor land, c
	a. Location Alpine Meadows Drive*	_ \$_>	\$	\$
	,	(value)	(owed)	(net value
	b. Location	\$	\$	\$
	b. Location * in foreclosure	(value)	(owed)	(net value
	A in foreclosure	(volume)	(55)	(HOL VOIGO)
	TOTAL AVAILABLE ASSETS:		\$	
	TO THE TOTAL PRODUCTION			
ΕX	(PENSES:			
9.	List below all monthly expenses not already deducted	from your pay.	. 1	
	a. Rent or house payment	,, .	\$ all pail	la familia
	b. Total cost of utilities (water, electric, gas, telephone,	trash)	\$ / /	7 , 200 9
	c. Food	,	\$	
	d. Credit card payments		\$	T'
	e. Installment loan payments		\$	***************************************
	f. Charge account payments		\$	
	g. Motor vehicle payments		\$	· · · · · · · · · · · · · · · · · · ·
	h. Union dues		s	
	i. Medical care costs (doctors, dentists, medicine)		s	
	j. Child support and alimony		s	
	k. Cost of baby-sitter		\$	
	Motor vehicle insurance, maintenance and gas		S	
	guo			
10.	. Do you have any expenses (monthly or otherwise) not	t shown above? If ves	s please list belo)W
	a. leral expenses paid les		\$	
	Ji iliya y	(how often paid)	T	
	b. tand	(\$	
		(how often paid)	(how much)	
	c	(a	\$	
		(how often paid)	(how much)	
		, , , , , , , , , , , , , , , , , , , ,	,	
	TOTAL MONTHLY EXPENSES:		\$	

e. Beneficial interest in a trust

11. Are any of your expenses past ? If yes, please	ist below.
a. all of my delete are in	Le fan / s
b	(how often paid) (how much)
c	(how often paid) (how much)
	(how often paid) (how much)
12. Do you have an attorney to help you with this case? If yes, what is his/her name:attorney? [] Yes [] No	K) Yes [] No If no, are you planning to hire your own
13. Do you want the Court to appoint an attorney (public a. How much can you pay as a down payment for a b. How much can you pay each month for attorney	attorney fees? \$
may be held in contempt of court, or prosecuted misrepresentation, or concealment, or if I continue to	nd completely given the information in this statement. It is presented, my financial resources. I am aware that I for perjury if I have made any false statements or accept the services of a court appointed attorney after ut notifying my court appointed attorney. In any such against me.
hereby make these representations under PENALTY (OF PERJURY:
Date: <u> </u>	nature: Stre) Moch
Witnessed by: Social Security	No.: 099-42-3468